

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)**

10/506862

FILING DATE

ATTORNEY

CLAIMS

	AS FILED		AFTER IN AMENDMENT		AFTER IN AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	8					
TOTAL DEP.	11					
TOTAL CLAIMS	19					

	AS FILED		AFTER IN AMENDMENT		AFTER IN AMENDMENT	
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